Filli	n this inform	ation to identify your	case:			
Debt	or 1	Justin Robert Au		Last Name		
Debt	or 2	First Name	Middle Name	Last Name		
	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Banl	kruptcy Court for the:	DISTRICT OF OREGON			
Case	e number 17	7-60203				
(if know		7-00203			☐ Chec	ck if this is an
					amer	nded filing
Offi	icial For	m 106Sum				
Sun	nmary of	Your Assets	and Liabilities and	d Certain Statistical Informatio	n	12/15
				are filing together, both are equally responsib		
				information on this form. If you are filing ame	ended sched	ules after you file
Part	1: Summa	rize Your Assets	-			
1 art	i. Cumma	TIZE TOUI ASSETS				
						assets of what you own
1	Schodulo A/I	R. Proporty (Official E	orm 1064/B)			,
		<b>B: Property</b> (Official Fo 55, Total real estate, f			\$	165,000.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$	13,344.00
			•			
	1c. Copy line	63, Total of all propert	y on Schedule A/B		\$	178,344.00
Part :	2: Summa	rize Your Liabilities				
					Your	liabilities
					Amou	nt you owe
			laims Secured by Property (		5 \$	125,787.00
		•		ne bottom of the last page of Part 1 of Schedule L	<i>J</i> Ψ	120,101100
			Unsecured Claims (Official 1 (priority unsecured claims	Form 106E/F) .) from line 6e of <i>Schedule E/F</i>	\$	50,561.00
	.,		u ,	,		00.544.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured cla	nims) from line 6j of Schedule E/F	\$	26,544.00
				V	u	000 000 00
				Your total liabili	ties   \$	202,892.00
Dord	0		<b>F</b>			
Part	3: Summa	rize Your Income and	Expenses			
		our Income (Official Formbined monthly incom		······································	\$	2,960.00
		our Expenses (Official onthly expenses from li			\$	2,260.00
Part -	4: Answer	These Questions for	Administrative and Statis	tical Records		
6	Are you filing	n for hankruntov und	or Chanters 7 11 or 122			
6.			er Chapters 7, 11, or 13? on this part of the form. Ch	eck this box and submit this form to the court with	າ your other sc	chedules.
	■ Yes					
7.		debt do you have?				

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	50,561.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	11,331.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	61,892.00

Official Form 106A/B  Schedule A/B: Property  In each category, separately list and describe Items. List an asset only once. If an asset fits in more than one category, list the asset in the category withink if it its best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if knownswer every question.  Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in  Do you own or have any legal or equitable interest in any residence, building, land, or similar property?  No. Go to Part 2:  Yes. Where is the property?  What is the property? Check all that apply  Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Describe the nature of your ownership in (such as fee simple, tenancy by the entire of line estate), if known.  Felorence OR 97439-0000 Timeshare Other information you wish to add about this item, such as local	Fill in this information		• .				
United States Bankruptcy Court for the: DISTRICT OF OREGON  Case number 17-60203				Name	Last Name		
Case number   17-60203   Check if the amended   Check if the amend	Debtor 2						
Case number 17-60203	Spouse, if filing) F	irst Name	Middle	Name	Last Name		
Difficial Form 106A/B Schedule A/B: Property  Leach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category with it if its beat. Be as compiled and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if knownswer every question.  Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in  Do you own or have any legal or equitable interest in any residence, building, land, or similar property?  No. Go to Part 2.  Yes. Where is the property?  What is the property? Check all that apply  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Land  Land  Land  Linvestment property  Timeshare  Other  Debtor 1 only  Debtor 1 only  Debtor 2 only  Crewitors Who Plave Claims Couranty by the entire a life estate), if known.  Fee Simple  County  Check if this is community property  [See instructions)	Jnited States Bankru	ptcy Court for the	e: DISTRICT	OF ORE	EGON		
Difficial Form 106A/B Schedule A/B: Property  each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category when ink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if knownswer every question.)  Do you own or have any legal or equitable interest in any residence, building, land, or similar property?  No. Go to Part 2.  Yes. Where is the property?  What is the property? Check all that apply  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Lone  Describe the nature of your ownership in (such as fee simple, tenancy by the entire a life estate), if known.  Fee Simple  County  At least one of the debtors and another  Other information you wish to add about this item, such as local	Case number 17-6	0203					_
Eschedule A/B: Property  It ach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category when ink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if knownswer every question.    Part I:   Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in							amended ming
each category, separately list and describe items. List an asset only once. If an asset filts in more than one category, list the asset in the category who ink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if knownswer every question.    Part 1:	Official Form	106A/B					
each category, separately list and describe items. List an asset only once. If an asset filts in more than one category, list the asset in the category when ink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if knownswer every question.    Part 1:	Schedule A	A/B: Pro	perty				12/15
What is the property?    Sample   Single   Florence   OR   97439-0000		Residence, Build	ding, Land, or Oth	her Real	Estate You Own or Have an Interest In		
What is the property? Check all that apply    Single-family home	Do you own or have	any legal or equit	able interest in a	ny reside	ence, building, land, or similar property?		
## Single-family home   Do not deduct secured claims or exemption							
## What is the property? Check all that apply    Single-family home	■ No. Go to Part 2.						
Single-family home Duplex or multi-unit building Condominium or cooperative    Manufactured or mobile home   Land	_	property?					
Single-family home Duplex or multi-unit building Condominium or cooperative    Manufactured or mobile home	_	property?					
Street address, if available, or other description  Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land  City State ZIP Code  Investment property Itimeshare Other Other Who has an interest in the property? Check one Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local	_	property?					
Florence OR 97439-0000  City State ZIP Code Investment property Investment	Yes. Where is the			What	is the property? Check all that apply		
Florence OR 97439-0000  City State ZIP Code Investment property State	Yes. Where is the 5333 Viola St.		dia.	What			
Florence OR 97439-0000  City State ZIP Code Investment property \$165,000.00 \$	Yes. Where is the 1.1 5333 Viola St.		otion		Single-family home  Duplex or multi-unit building	the amount of any seco	ured claims on Schedule D:
City  State  ZIP Code  Investment property  Timeshare Other  Who has an interest in the property? Check one Debtor 1 only  Debtor 2 only  County  County  S165,000.00  \$165,000.00  \$165,000.00  \$165,000.00  \$165,000.00  \$165,000.00  \$165,000.00  \$165,000.00  S165,000.00  S165,000.00  County Specifie the nature of your ownership in (such as fee simple, tenancy by the entire a life estate), if known.  Fee Simple  Check if this is community property (see instructions)  Other information you wish to add about this item, such as local	Yes. Where is the 1.1 5333 Viola St.		otion		Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any seco	ured claims on Schedule D:
County  Describe the nature of your ownership in (such as fee simple, tenancy by the entire a life estate), if known.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, such as local	Yes. Where is the  1.1  5333 Viola St.  Street address, if avail	lable, or other descrip			Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	the amount of any sectoreditors Who Have Control Courrent value of the	ured claims on Schedule D: laims Secured by Property.
County	Yes. Where is the  1.1  5333 Viola St.  Street address, if avail	lable, or other descrip	97439-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any sectoreditors Who Have Control Value of the entire property?	ured claims on Schedule D: laims Secured by Property.  Current value of the portion you own?
Debtor 1 only  Lane  Debtor 2 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, such as local	Yes. Where is the  1.1  5333 Viola St.  Street address, if avail	lable, or other descrip	97439-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property	the amount of any sectoreditors Who Have Control Courrent value of the entire property?  \$165,000.00	Current value of the portion you own?  \$\frac{1}{2} \text{ (a) The portion (b) Property.} \text{ (b) Property.} \text{ (c) The portion (c) Property.}  (c) The portion (c) Propert
Lane  County  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, such as local	Yes. Where is the  5333 Viola St.  Street address, if avail	lable, or other descrip	97439-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other	the amount of any sectoreditors Who Have Control Value of the entire property?  \$165,000.00  Describe the nature of (such as fee simple, 1)	Current value of the portion you own?  \$\frac{1}{2}\$  \$\frac{1}{2}
County  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  Other information you wish to add about this item, such as local	Yes. Where is the  5333 Viola St.  Street address, if avail	lable, or other descrip	97439-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one	current value of the entire property?  \$165,000.00  Describe the nature of (such as fee simple, to a life estate), if known	Current value of the portion you own?  \$\frac{1}{2}\$  \$\frac{1}{2}
At least one of the debtors and another (see instructions)  Other information you wish to add about this item, such as local	Yes. Where is the  5333 Viola St.  Street address, if avail  Florence  City	lable, or other descrip	97439-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	current value of the entire property?  \$165,000.00  Describe the nature of (such as fee simple, to a life estate), if known	Current value of the portion you own?  \$\frac{1}{2}\$  \$\frac{1}{2}
·	Yes. Where is the  5333 Viola St.  Street address, if avail  Florence  City  Lane	lable, or other descrip	97439-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one Debtor 1 only Debtor 2 only	the amount of any sect Creditors Who Have Control Courrent value of the entire property?  \$165,000.00  Describe the nature of (such as fee simple, the latter of the estate), if known Fee Simple	Current value of the portion you own?  \$\frac{1}{2}\$  \$\frac{1}{2}
near order identification nember.	Yes. Where is the  5333 Viola St. Street address, if avail  Florence City  Lane	lable, or other descrip	97439-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any sect Creditors Who Have Control Current value of the entire property?  \$165,000.00  Describe the nature of (such as fee simple, the latter of the estate), if known fee Simple  Check if this is control Check if the Check if this is control Check if this is control Check if the	Current value of the portion you own?  \$\frac{1}{2}\$  \$\frac{1}{2}
property identification number:	Yes. Where is the  5333 Viola St. Street address, if available  Florence City  Lane	lable, or other descrip	97439-0000	Who I	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	the amount of any sect Creditors Who Have Control Cont	Current value of the portion you own?  \$\frac{1}{2}\$  \$\frac{1}{2}
	Yes. Where is the  1.1  5333 Viola St.  Street address, if avail  Florence  City  Lane	lable, or other descrip	97439-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	the amount of any sect Creditors Who Have Control Cont	Current value of the portion you own?  \$\frac{1}{2}\$  \$\frac{1}{2}

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Debtor 1 Justin Robert Austen		Case number (if known)	17-60203
3. Cars, vans, trucks, tractors, sport utility v	rehicles, motorcycles		
□No	•		
■ Yes			
<b>–</b> 165			
3.1 Make: <b>Mazda</b>	Who has an interest in the property? Check one		red claims or exemptions. Put
Model: 3	■ Debtor 1 only		secured claims on Schedule D: re Claims Secured by Property.
Year: <b>2012</b>	Debtor 2 only	Current value of the	he Current value of the
Approximate mileage: 95,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other information:	At least one of the debtors and another		
	☐ Check if this is community property (see instructions)	\$6,674	\$6,674.00
pages you have attached for Part 2. Write  Part 3: Describe Your Personal and Household			\$6,674.00
Do you own or have any legal or equitable i  6. Household goods and furnishings	nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples: Major appliances, furniture, linen  □ No  ■ Yes. Describe	s, china, kitchenware		
Appliances an	d furniture		\$500.00
друпаноез ан	a rannare		
7. Electronics  Examples: Televisions and radios; audio, via including cell phones, cameras,  □ No ■ Yes. Describe  2 Computers a	. ,	rinters, scanners; music co	ollections; electronic devices \$1,500.00
<ul> <li>B. Collectibles of value  Examples: Antiques and figurines; paintings other collections, memorabilia, c  □ No  ■ Yes. Describe</li> </ul>	s, prints, or other artwork; books, pictures, or othe collectibles	er art objects; stamp, coin,	or baseball card collections;
Books			\$500.00
9. Equipment for sports and hobbies  Examples: Sports, photographic, exercise, a musical instruments  □ No ■ Yes. Describe	and other hobby equipment; bicycles, pool tables	, golf clubs, skis; canoes a	nd kayaks; carpentry tools;

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Justin Robe	ert Austen	Ca	ase number (if known)	17-60203
		Vintage violin \$900			
		Bass clarnet \$500			
		Mandolin \$400			\$1,800.00
10. <b>Firear</b> ı					
	ples: Pistols, rifle	es, shotguns, ammunition, and re	lated equipment		
■ No					
☐ Yes.	Describe				
11. Clothe	es				
Exam	<i>ples:</i> Everyday c	clothes, furs, leather coats, design	ner wear, shoes, accessories		
☐ No					
Yes.	Describe				
		Olaskia a			¢200.00
		Clothing			\$300.00
12. <b>Jewel</b> ı					
	<i>ples:</i> Everyday je	ewelry, costume jewelry, engage	ment rings, wedding rings, heirloom jewe	elry, watches, gems, g	jold, silver
■ No					
⊔ Yes.	Describe				
13. <b>Non-fa</b>	arm animals				
	ples: Dogs, cats,	, birds, horses			
□ No					
Yes.	Describe				
		Daniel Chiefer			¢0.00
		Dog and 5 Chickens			\$0.00
14. <b>Any o</b> t	ther personal ar	nd household items you did no	ot already list, including any health aid	s you did not list	
■ No					
☐ Yes.	Give specific in	formation			
15. <b>Add</b>	the dollar value	of all of your entries from Par	t 3, including any entries for pages yo	u have attached	¢4 coo oo
for P	art 3. Write that	number here			\$4,600.00
Part 4: De	escribe Your Finar	ncial Assets			
Do you ov	wn or have any	legal or equitable interest in a	ny of the following?		Current value of the
					portion you own?  Do not deduct secured
					claims or exemptions.
					, , , , , , , , , , , , , , , , , , ,
16. Cash	unles: Money you	have in your wallet in your hom	e, in a safe deposit box, and on hand wh	en vou file vour netiti	on
□ No	pies. Money you	nave in your wailer, in your nom	e, iii a sale deposit box, and on hand wii	en you me your penn	OH
<b>—</b> 103.					
				Cash	\$20.00
17 Denos	sits of money				
		savings, or other financial accou	nts; certificates of deposit; shares in cred	it unions, brokerage I	nouses, and other similar
			ith the same institution, list each.	J	
□ No			In althorism an arms		
Yes.			Institution name:		
		17.1. Checking	US Bank		\$50.00

Official Form 106A/B Schedule A/B: Property

page 3

Deb	tor 1 Jus	stin Robert Austen				Case number (	if known)	17-60203
_	Examples: E	ual funds, or publicly Bond funds, investmen		erage firms, money	market accounts			
	No Yes	lr	nstitution or issuer na	ame:				
	Non-publicl joint ventui ] No		terests in incorpor	ated and unincorpo	orated businesse	s, including ar	n interest	in an LLC, partnership, and
_	_	specific information al Name	bout theme of entity:			% of ownershi	ip:	
		Ever	wild, LLC (liquid	ation value)		75%	_ %	\$2,000.00
	Negotiable I	t and corporate bond instruments include pe able instruments are th	rsonal checks, cashi	iers' checks, promiss	sory notes, and mo	oney orders.		
_	No Yes. Give	specific information ab	oout them or name:					
		or pension accounts nterests in IRA, ERISA		3(b), thrift savings ac	ccounts, or other p	ension or profit	-sharing p	olans
	Yes. List e	each account separatel Type of	y. account:	Institution nam	e:			
	Your share Examples:	posits and prepayme of all unused deposits Agreements with landlo	you have made so the				compani	es, or others
	No Yes			Institution nam	e or individual:			
_	Annuities (A	A contract for a periodic	payment of money	to you, either for life	e or for a number o	f years)		
	] Yes	Issuer name	and description.					
2	6 U.S.C. §§	an education IRA, in a 530(b)(1), 529A(b), ar		alified ABLE progra	am, or under a qu	alified state tu	ition pro	gram.
	No Yes	Institution na	me and description.	Separately file the re	ecords of any inter	ests.11 U.S.C.	§ 521(c):	
	No	itable or future intere		ner than anything li	sted in line 1), an	d rights or pov	vers exe	rcisable for your benefit
26. <b>I</b>	Patents, cop Examples: I	pyrights, trademarks, nternet domain names	, trade secrets, and			nts		
	No Yes. Give	specific information at	oout them					
_		anchises, and other guilding permits, exclusion			oldings, liquor licen	ises, profession	al license	es
		specific information al	oout them					
Mor	ney or prop	erty owed to you?						Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

De	ebtor 1	Justin Robert Austen	Case number (if known)	17-60203
28.	Tax ref ■ No	iunds owed to you		
	☐ Yes.	Give specific information about them, including whether you alread	dy filed the returns and the tax years	
29.		support oles: Past due or lump sum alimony, spousal support, child suppo	rt, maintenance, divorce settlement, property	settlement
	■ No □ Yes.	Give specific information		
30.		amounts someone owes you  bles: Unpaid wages, disability insurance payments, disability bene benefits; unpaid loans you made to someone else	fits, sick pay, vacation pay, workers' comper	nsation, Social Security
	_	Give specific information		
31.		ets in insurance policies oles: Health, disability, or life insurance; health savings account (H	ISA); credit, homeowner's, or renter's insuran	ce
	☐ Yes.	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
32.	If you a	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insone has died.		eive property because
	_	Give specific information		
33.		against third parties, whether or not you have filed a lawsuit oles: Accidents, employment disputes, insurance claims, or rights		
	■ No	Describe each claim		
24			and visite to the debter and visite to	act off alaima
34.	■ No	contingent and unliquidated claims of every nature, including	counterclaims of the deptor and rights to	Set on Claims
	☐ Yes.	Describe each claim		
35.	Any fin  ■ No	nancial assets you did not already list		
		Give specific information		
36		the dollar value of all of your entries from Part 4, including an art 4. Write that number here		\$2,070.00
Pa	rt 5: De	scribe Any Business-Related Property You Own or Have an Interest Ir	n. List any real estate in Part 1.	
37.	Do you o	own or have any legal or equitable interest in any business-related pro	operty?	
I	No. Go	to Part 6.		
I	☐ Yes. G	Go to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own ou own or have an interest in farmland, list it in Part 1.	or Have an Interest In.	
46.		own or have any legal or equitable interest in any farm- or co	ommercial fishing-related property?	
	_	Go to Part 7.  Go to line 47.		
Pa	rt 7:	Describe All Property You Own or Have an Interest in That You Did	Not List Above	

Schedule A/B: Property

page 5

Official Form 106A/B

Debt	tor 1 Justin Robert Austen		Case number (if known)	17-60203
	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership	?		
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
Part 8	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$165,000.00
56.	Part 2: Total vehicles, line 5	\$6,674.00		
57.	Part 3: Total personal and household items, line 15	\$4,600.00		
58.	Part 4: Total financial assets, line 36	\$2,070.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$13,344.00	Copy personal property to	otal <b>\$13,344.00</b>
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$178,344.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:		
Debtor 1	Justin Robert Au	sten		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON		
Case number	17-60203			
(if known)	17 00200			Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming?	Check one only, even	if your spouse is filing with you.	
	■ You are claiming state and federal nonbank	cruptcy exemptions. 1	1 U.S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)		
2.	For any property you list on Schedule A/B	that you claim as exer	mpt, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from	Check only one box for each exemption.	

portion you own			
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$165,000.00		\$40,000.00	ORS §§ 18.395, 18.402
		100% of fair market value, up to any applicable statutory limit	
\$6,674.00		\$3,000.00	ORS § 18.345(1)(d)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	ORS § 18.345(1)(f)
		100% of fair market value, up to any applicable statutory limit	
\$1,500.00		\$1,500.00	ORS § 18.345(1)(f)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	ORS § 18.345(1)(a)
		100% of fair market value, up to any applicable statutory limit	
	\$165,000.00 \$165,000.00 \$6,674.00 \$1,500.00	\$1,500.00 \$500.00 \$500.00 \$\$500.00	Copy the value from Schedule A/B  \$165,000.00  \$40,000.00  100% of fair market value, up to any applicable statutory limit  \$6,674.00  \$3,000.00  100% of fair market value, up to any applicable statutory limit  \$500.00  \$1,500.00  \$1,500.00  \$1,00% of fair market value, up to any applicable statutory limit  \$1,500.00  \$1,00% of fair market value, up to any applicable statutory limit  \$500.00  \$500.00  \$500.00  \$1,00% of fair market value, up to any applicable statutory limit

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Best Case Bankruptcy

De	btor 1 Justin Robert Austen			Case number (if known)	17-60203
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che		
	Vintage violin \$900 Bass clarnet \$500	\$1,800.00		\$100.00	ORS § 18.345(1)(a)
	Mandolin \$400 Line from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit	
	Clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	ORS § 18.345(1)(b)
	Line Holli Schedule A/B. 1111			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	ORS § 18.345(1)(p)
	Line Holli Schedule Arb. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking: US Bank Line from Schedule A/B: 17.1	\$50.00		\$50.00	ORS § 18.345(1)(p)
	Line Holli Schedule Arb. 11.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every  No			led on or after the date of adjustmen	ıt.)
	☐ Yes. Did you acquire the property cover☐ No	ed by the exemption wi	ithin 1	215 days before you filed this case?	?
	∐ No □ Ves				

Fill in this information to identify yo	ur case:				
Debtor 1 Justin Robert A	Austen				
First Name	Middle Name	Last Name		-	
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the	e: DISTRICT OF OREGON				
Coop number 47 COOP					
Case number (if known) 17-60203					if this is an led filing
Official Form 106D					
Schedule D: Creditors	s Who Have Claims	s Secured	by Propert	У	12/15
Be as complete and accurate as possible is needed, copy the Additional Page, fill it number (if known).					
1. Do any creditors have claims secured b	by your property?				
$\square$ No. Check this box and submit	this form to the court with your oth	her schedules. Yo	u have nothing else t	o report on this form.	
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has	more than one secured claim, list the	creditor separately	Column A	Column B	Column C
for each claim. If more than one creditor ha much as possible, list the claims in alphabe			Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Ditech Financial	Describe the property that secure	es the claim:	\$125,787.00	\$165,000.00	\$0.00
Creditor's Name	5333 Viola St. Florence, O Lane County	OR 97439			
PO Box 6172	As of the date you file, the claim	is: Check all that			
Rapid City, SD 57709	apply.  Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that app	ly.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such car loan)	as mortgage or secu	ured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien,	mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset	<u> </u>			
Date debt was incurred	Last 4 digits of account nu	umber <u>6263</u>			
Add the dollar value of your entries in			\$125,78	37.00	
If this is the last page of your form, add Write that number here:	the dollar value totals from all pag	es.	\$125,78	37.00	
Part 2: List Others to Be Notified f	or a Debt That You Already List	ted			
Use this page only if you have others to trying to collect from you for a debt you than one creditor for any of the debts the debts in Part 1, do not fill out or submit to	owe to someone else, list the credit at you listed in Part 1, list the addition	or in Part 1, and the	en list the collection a	gency here. Similarly, if	you have more
Name, Number, Street, City, State & Clear Recon Corp.		On which	n line in Part 1 did you e	nter the creditor? 2.1	
111 SW Columbia St. #950 Portland, OR 97201		Last 4 di	gits of account number	_	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Debt							
Debt	n this information to identify y	our case:					
	Guotini itoboli						
Debt	First Name	Midd	le Name	Last Name			
	se if, filing) First Name	Midd	le Name	Last Name			
Unite	ed States Bankruptcy Court for the	ne DISTRIC	T OF OREGON				
Ornic	ou dialest bankruptoy doubt for the	ic. <u> </u>	TO ONLOON				
	e number 17-60203						
(if kno	own)					_	f this is an
						amend	eu illing
Offi	cial Form 106E/F						
Sch	nedule E/F: Creditors	S Who Hav	ve Unsecure	ed Claims			12/15
any ex Sched Sched left. A	complete and accurate as possibl xecutory contracts or unexpired le dule G: Executory Contracts and U dule D: Creditors Who Have Claims ttach the Continuation Page to this and case number (if known).	ases that could in expired Leases Secured by Pros page. If you ha	result in a claim. Al (Official Form 1060 perty. If more space ve no information to	so list executory contra 3). Do not include any c e is needed, copy the Pa	cts on Schedule A/B: F reditors with partially s art you need, fill it out, i	roperty (Official Form ecured claims that a number the entries ir	n 106A/B) and or re listed in the boxes on th
	Oo any creditors have priority unse						
_	In No. Go to Part 2.	cuicu cidillis ag	amst you?				
_	Yes.						
<b>2. L</b> id p	List all of your priority unsecured c dentify what type of claim it is. If a cla possible, list the claims in alphabetica Part 1. If more than one creditor holds	im has both priori I order according	ty and nonpriority am to the creditor's name	nounts, list that claim here e. If you have more than t	and show both priority a	nd nonpriority amount	s. As much as
(1	For an explanation of each type of cla	aim, see the instru	uctions for this form in	the instruction booklet.)	Total claim	Priority amount	Nonpriority amount
2.1	Internal Revenue Servic	е	Last 4 digits of ac	count number	\$26,000.00	\$26,000.00	\$0.0
	Priority Creditor's Name		\\(\delta \)				
	PO Box 7346 Philadelphia, PA 19101-	7346	When was the deb	of incurred?			
	Number Street City State Zlp Co		As of the date you	ı file, the claim is: Check	all that apply		
	Who incurred the debt? Check one	9.	☐ Contingent				
	Debtor 1 only		☐ Unliquidated				
	Debtor 2 only		☐ Disputed				
	Debtor 1 and Debtor 2 only		Type of PRIORITY	unsecured claim:			
	☐ At least one of the debtors and a	nother	☐ Domestic suppo	ort obligations			
	☐ Check if this claim is for a con	nmunity debt	Taxes and certa	ain other debts you owe th	ne government		
	Is the claim subject to offset?	•		h or personal injury while			
	■ No		Other. Specify				
	Yes			2011 - 2015 withh	olding taxes		
2.2	ODB Pkov		Last 4 digits of as	count number	\$24 E61 00	\$24 E61 00	\$0.0
2.2	ODR Bkcy Priority Creditor's Name 955 Center St NE		Last 4 digits of ac		\$24,561.00	\$24,561.00	<u> </u>
	Salem, OR 97301-2555  Number Street City State Zlp Cod	de	As of the date you	ı file, the claim is: Check	all that annly		
	=		☐ Contingent	,	an and apply		
	Who incurred the debt? Check one		- Contingont				
	Who incurred the debt? Check one  Debtor 1 only		☐ Unliquidated				
	Debtor 1 only		☐ Unliquidated				
	■ Debtor 1 only □ Debtor 2 only		☐ Disputed	unsecured claim:			
	■ Debtor 1 only  □ Debtor 2 only □ Debtor 1 and Debtor 2 only		Disputed  Type of PRIORITY				
	■ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and a	nother	☐ Disputed  Type of PRIORITY  ☐ Domestic suppo	ort obligations			
	■ Debtor 1 only  □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and a □ Check if this claim is for a con	nother	☐ Disputed  Type of PRIORITY  ☐ Domestic suppo	ort obligations ain other debts you owe th	=		
	■ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and a	nother	☐ Disputed  Type of PRIORITY  ☐ Domestic suppo	ort obligations	=		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 4

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37294

Best Case Bankruptcy

Debto	Justin Robert Austen		Case number (if know)	17-60203			
Part 2	List All of Your NONPRIORITY Unsecur	red Claims					
3. Do	any creditors have nonpriority unsecured claims	s against you?					
	No. You have nothing to report in this part. Submit the	his form to the court with your other sche	dules.				
	Yes.						
		alababatical auday of the avaditor who	halds each alaim If a area	ditor has more than one popularity.			
un: tha	st all of your nonpriority unsecured claims in the a secured claim, list the creditor separately for each clain one creditor holds a particular claim, list the other of the control of the control of th	aim. For each claim listed, identify what t	ype of claim it is. Do not list	claims already included in Part 1. If more			
	··			Total claim			
4.1	Bank of America	Last 4 digits of account number	2xxx	\$1,056.00			
	Nonpriority Creditor's Name	When was the debt incurred?					
	PO Box 982236 El Paso, TX 79998-2236	when was the dept incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only Unliquidated Unliquidated						
	☐ Debtor 1 and Debtor 2 only ☐ Disputed						
	☐ At least one of the debtors and another  Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce	that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar de	ebts			
	Yes	Other. Specify Misc.					
4.2	Capital One Bank	Last 4 digits of account number	3xxx	\$3,128.00			
	Nonpriority Creditor's Name						
	PO Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce	that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar de	ebts			

Official Form 106 E/F

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify \_Misc.

Debtor	Justin Robert Austen		Case number (if know) 17-602	03					
	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number	<u>9xxx</u>	\$3,196.00					
	PO Box 60024 City Of Industry, CA 91716	When was the debt incurred?	-						
-	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply						
	Who incurred the debt? Check one.								
	Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	Disputed							
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did						
	Is the claim subject to offset?	report as priority claims	tration agreement or divorce that you did	not					
	No	Debts to pension or profit-sharing	g plans, and other similar debts						
	Yes	Other. Specify Misc.							
4.4	Nelnet	Last 4 digits of account number		\$11,331.00					
	Nonpriority Creditor's Name  Dept. of Education	When was the debt incurred?							
	PO Box 740283 Atlanta, GA 30374-0283								
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply						
	Who incurred the debt? Check one.	_							
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only ☐ Disputed  Type of NONPRIORITY unsecured claim:								
	At least one or the debtors and another								
	☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not								
	Is the claim subject to offset?	report as priority claims	iration agreement of divorce that you did	not					
	No	Debts to pension or profit-sharing	g plans, and other similar debts						
	☐ Yes	Other. Specify							
		Student loa	ins						
	Pro Lumber, Inc. Nonpriority Creditor's Name	Last 4 digits of account number		\$7,833.00					
	PO Box 40 Florence, OR 97439	When was the debt incurred?							
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply						
	Who incurred the debt? Check one.								
	Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community debt	☐ Student loans	and an arrange of the state of						
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did	not					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts						
	Yes	Other. Specify Business d	ebt	<u></u>					
Part 3:	List Others to Be Notified About a Debt	That You Already Listed							
5. Use thing is trying have n	is page only if you have others to be notified about to collect from you for a debt you owe to some or than one creditor for any of the debts that you for any debts in Parts 1 or 2, do not fill out or some Add the Amounts for Each Type of Unstantial Control of the Amounts for Each Type of Unstantial Control of the Amounts for Each Type of Unstantial Control of the Amounts for Each Type of Unstantial Control of the Amounts for Each Type of Unstantial Control of the Co	out your bankruptcy, for a debt that y eone else, list the original creditor in ou listed in Parts 1 or 2, list the addi submit this page.	Parts 1 or 2, then list the collection a	gency here. Similarly, if you					

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 4

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 50,561.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 50,561.00
				Total Claim
	6f.	Student loans	6f.	\$ 11,331.00
Total claims				
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 15,213.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 26,544.00

Fill in this infor	mation to identify your			
Debtor 1	Justin Robert Au	sten		
	First Name	Middle Name	Last Name	-
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	-
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON		
Case number	17-60203			
(if known)				☐ Check if this is an amended filing

#### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1		·	•		
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4			<u> </u>		
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	- ity		<u> </u>	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	_

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in thi	s information to identify your	case:			
Debtor 1	Justin Robert Au	sten			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
	ates Bankruptcy Court for the:	DISTRICT OF OREGO	N		
Case nun	phor 47 60202				
(if known)	17-60203				☐ Check if this is an amended filing
Officia	al Form 106H				
		alatana			
Sche	dule H: Your Cod	eptors			12/15
fill it out, a		boxes on the left. Attac ). Answer every question	h the Additional Page to n.	o this page. On the top	eded, copy the Additional Page, of any Additional Pages, write
1. 00	you have any codebiors? (II	you are ming a joint case,	do not list either spouse	as a codebior.	
■ No					
☐ Ye	S				
	thin the last 8 years, have yona, California, Idaho, Louisiana				states and territories include
■ No	. Go to line 3.				
☐ Ye	s. Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in lin Form	e 2 again as a codebtor only	if that person is a guarar	ntor or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	litor to whom you owe the debt that apply:
3.1				☐ Schedule D. line	
0.1	Name			☐ Schedule E/F, lin	e
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, lin	e
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

Schedule H: Your Codebtors

Fill	in this information to identify your c	ase:				1				
	otor 1 Justin Robe									
	otor 2				_					
Uni	ted States Bankruptcy Court for the	: DISTRICT OF OREG	ON							
Cas	se number 17-60203					Chec	k if this is	:		
(If kr	lown)		-				n amend	ed filing		
									g postpetition ollowing date:	chapter
0	fficial Form 106I					N	MM / DD/ `	YYYY		
S	chedule I: Your Inc	ome								12/1
sup spo atta Par	is complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  11: Describe Employment	are married and not filing wi	ng jointly, and your ith you, do not incl	spouse i	is liv mati	ing with on abou	you, incl t your sp	lude inforr ouse. If m	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor	2 or non-fi	iling spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional employers.	Employment status	☐ Not employed				□ Not e	employed		
		Occupation	Self-employed	contrac	tor					
	Include part-time, seasonal, or self-employed work.	Employer's name	Everwild, LLC							
	Occupation may include student or homemaker, if it applies.	Employer's address	5333 Viola St. Florence, OR 9	7439						
		How long employed to	here? 14 mo	nths			_			
Par	t 2: Give Details About Mor	nthly Income								
spou If yo	mate monthly income as of the duse unless you are separated.  u or your non-filing spouse have more space, attach a separate sheet to	ate you file this form. If	, ,	·		,	that perso	on on the li	,	J
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Justin Robert Austen	_		Case r	number (if ki	nowi	7)	17-60	0203			
	Con	y line 4 here	4.		For	Debtor 1	0.0	0		Debtor	r 2 or spouse N/A		
5.		all payroll deductions:			·	`		_	Ť—			<u>.</u>	
J.	5a.	Tax, Medicare, and Social Security deductions	5.	a.	\$		n n	^	\$		NI//		
	5a. 5b.	Mandatory contributions for retirement plans		a. b.	\$		0.0 0.0	_	\$ 		N/A	_	
	5c.	Voluntary contributions for retirement plans		c.	\$		0.0		\$		N/A	_	
	5d.	Required repayments of retirement fund loans		d.	\$		0.0	_	\$		N/A	_	
	5e.	Insurance		e.	\$		0.0	_	\$		N/A		
	5f.	Domestic support obligations	51	f.	\$		0.0	0	\$		N/A	_	
	5g.	Union dues	5	g.	\$		0.0	0	\$		N/A	<u> </u>	
	5h.	Other deductions. Specify:	51	h.+	\$	(	0.0	0 +	+ \$		N/A	<u> </u>	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	(	0.0	0	\$		N/A	<u>\</u>	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	(	0.0	0_	\$		N/A	<u>\</u>	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	0.	a.	\$	2.064		•	\$		N//		
	8b.	Interest and dividends	81		\$ 	2,960	0.0		\$ 		N/A	_	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	-	υ.	Ψ	· · · · · · · · · · · · · · · · · · ·	<u></u>	<u>.                                    </u>	Ψ		IN/F	_	
		settlement, and property settlement.	80	c.	\$	(	0.0	0	\$		N/A		
	8d.	Unemployment compensation		d.	\$		0.0	_	\$		N/A	_	
	8e.	Social Security	86	e.	\$		0.0		\$		N/A	_	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	81		\$		0.0	_	\$		N/A	_	
	8g.	Pension or retirement income	8		\$		0.0		\$		N/A	_	
	8h.	Other monthly income. Specify:	_ 81	h.+	· \$	(	0.0	0 +	- \$		N/A	<u>\</u>	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	2,960	0.0	0	\$		N/	Ά	
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	2	2,960.00	+	\$		N/A	= \$	2.9	60.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.											
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	dep		•						le J. +\$		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes								12.	\$	2,9	60.00
13.	Doy	you expect an increase or decrease within the year after you file this form	?								Comb		ome
		No. Yes Explain:											

Official Form 106I Schedule I: Your Income page 2

Fill	in this inforn	nation to identify yo	our case:							
Deb	tor 1	Justin Robe	rt Austen			Ch	neck i	if this is:		
	. 0							n amended filing		
Deb (Spo	tor 2 buse, if filing)								ving postpetition cha the following date:	ıpter
Unit	ed States Bar	nkruptcy Court for the	· DISTRI	CT OF OREGON			М	M / DD / YYYY		
Office		. ,	. DISTIN	OT OF ORLOOM			IVII	IVI / DD / TTTT		
1	e number nown)	17-60203								
Of	ficial F	orm 106J								
Sc	chedul	e J: Your	Exper	ises						12/15
info	rmation. If		eded, atta	If two married people ar ch another sheet to this n.						
Par		scribe Your House	hold							
1.	Is this a jo	oint case?								
	■ No. Go									
		oes Debtor 2 live	ın a separa	ate nousehold?						
		No Yes. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of D	ebtor	2.		
•			_	. , <b>,</b> , ,						
2.	-	ave dependents?	■ No							
	Do not list Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	
	Do not sta	te the							□ No	
	dependen	ts names.							☐ Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
							_		☐ Yes	
									☐ Yes	
3.	expenses	expenses include s of people other t and your depende	han $_{m \Box}$	No Yes						
Par	t 2: Esti	imate Your Ongoi	ng Monthl	y Expenses						
exp		of a date after the		uptcy filing date unless y y is filed. If this is a supp						
				government assistance it				.,		
(Off	icial Form	1061.)					_	Your expe	enses	
4.		I or home owners and any rent for th		ses for your residence. In r lot.	nclude first mortgage	e 4.	\$_		1,100.00	
	If not incl	uded in line 4:								
	4a. Rea	al estate taxes				4a.	\$		0.00	
		perty, homeowner's				4b.	- 1 -		0.00	
		ne maintenance, re	•			4c.			0.00	
5.		neowner's associat I <b>l mortgage paym</b> e		oominium dues our residence, such as ho	me equity loans	4d. 5.	\$ \$		0.00	

Deptor 1 Justin Robe	ert Austen	Case num	ber (if known)	17-60203
6. Utilities:				
6a. Electricity, hea	at, natural gas	6a.	\$	85.00
•	garbage collection	6b.		25.00
	Il phone, Internet, satellite, and cable services	6c.	\$	0.00
6d. Other. Specify	•	6d.	\$	0.00
7. Food and houseke		— 7.	\$	300.00
	Iren's education costs	8.	\$	0.00
Clothing, laundry, a		9.	\$	100.00
Personal care prod		10.	·	100.00
		11.		
	lude gas, maintenance, bus or train fare.	11.	Ψ	100.00
Do not include car pa		12.	\$	100.00
	os, recreation, newspapers, magazines, and books	13.	\$	100.00
	tions and religious donations	14.	· -	0.00
5. Insurance.	tions and rengious donations	17.	Ψ	0.00
	ance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	and addition your pay or moradou in into 7 or 20.	15a.	\$	0.00
15b. Health insurar	nce	15b.		150.00
15c. Vehicle insura		15c.	\$	0.00
15d. Other insuran		15d.	\$	
	te taxes deducted from your pay or included in lines 4 or 20.	130.	Ψ	0.00
Specify:	le taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
<ol><li>Installment or lease</li></ol>				
17a. Car payments		17a.	·	0.00
<ol><li>17b. Car payments</li></ol>		17b.	\$	0.00
<ol><li>17c. Other. Specify</li></ol>		17c.	\$	0.00
17d. Other. Specify	:	17d.	\$	0.00
8. Your payments of a	llimony, maintenance, and support that you did not report as	3		0.00
	r pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
<ol><li>Other payments yo</li></ol>	u make to support others who do not live with you.		\$	0.00
Specify:		19.		
	expenses not included in lines 4 or 5 of this form or on Scho			
20a. Mortgages on		20a.		0.00
20b. Real estate ta	xes	20b.		0.00
	eowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance,	repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's	association or condominium dues	20e.	\$	0.00
1. Other: Specify: P	et expenses	21.	+\$	100.00
2. Calculate your mor	· ·			
22a. Add lines 4 thro	S .		\$	2,260.00
22b. Copy line 22 (m	nonthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line 22a an	d 22b. The result is your monthly expenses.		\$	2,260.00
3. Calculate your mor	thly net income.			
23a. Copy line 12 (	your combined monthly income) from Schedule I.	23a.	\$	2,960.00
	nthly expenses from line 22c above.	23b.		2,260.00
-177		- **		
23c. Subtract your	monthly expenses from your monthly income.			
	our monthly net income.	23c.	\$	700.00
For example, do you ex modification to the term	ncrease or decrease in your expenses within the year after your pect to finish paying for your car loan within the year or do you expect you sof your mortgage?			ease or decrease because of a
■ No.	alain bana			
☐ Yes. Ex	plain here:			

Fill in this information to identify you	r case:		
Debtor 1 Justin Robert A	usten		
First Name	Middle Name	Last Name	
Debtor 2			
(Spouse if, filing) First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:	DISTRICT OF OREGON		
Case number 17-60203			
(if known)			☐ Check if this is an amended filing
obtaining money or property by fraud years, or both. 18 U.S.C. §§ 152, 1341,	file bankruptcy schedules or in connection with a bankru	r amended schedules. Makir	formation.  ng a false statement, concealing property, or sup to \$250,000, or imprisonment for up to 20
Sign Below			
Did you pay or agree to pay som	eone who is NOT an attorne	y to help you fill out bankru	ptcy forms?
■ No			
Yes. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declar that they are true and correct.	e that I have read the summa	ary and schedules filed with	this declaration and
X /s/ Justin Robert Austen		X	
Justin Robert Austen		Signature of Debtor	2

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

Date

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Signature of Debtor 1

Date **February 10, 2017** 

Best Case Bankruptcy

	l in this inform	otion to identify you				
		ation to identify you				
De	btor 1	Justin Robert Au First Name	Middle Name	Last Name		
	btor 2	-				
	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ban	kruptcy Court for the:	DISTRICT OF OREGON			
	se number 1	7-60203			_	heck if this is an mended filing
St Be	as complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
Pa	rt 1: Give Do	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	<ul><li>☐ Married</li><li>■ Not marr</li></ul>	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List  Debtor 1 Pri		ived in the last 3 years. Do no	ot include where you live now		Dates Debtor 2
	Deptor 1 FT	or Address.	lived there	Debtor 2 Frior Ad	ui ess.	lived there
<b>3.</b> stat	es and territorie	es include Arizona, Ca		vada, New Mexico, Puerto R	ity property state or territory co, Texas, Washington and W	
Pa	rt 2 Explain	n the Sources of You	r Income			
4.	Fill in the total If you are filing	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$6,000.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Debtor 1 Justin Robert Austen Cas					Case number (if known) 17-60203					
					Debtor 1			Debtor 2		
					Sources of income Check all that apply.		income e deductions and ions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			dar year: December	31, 2016 )	☐ Wages, commissions, bonuses, tips		\$45,957.00	☐ Wages, com bonuses, tips	missions,	
					Operating a business			☐ Operating a	business	
			dar year be December		☐ Wages, commissions, bonuses, tips		Unknown	☐ Wages, com bonuses, tips	missions,	
					Operating a business			☐ Operating a	business	
	winr	nings. each s No	f you are fili	ng a joint cas	pensions; rental income; inter se and you have income that y sme from each source separa	you receiv	ed together, list it o	only once under De	ebtor 1.	d gambling and lottery
					Debtor 1			Debtor 2		
					Sources of income Describe below.	each s	e deductions and	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certain Pa	yments You	Made Before You Filed for	Bankrupt	су			
6.	Are □	<b>either</b> No.	Neither De	ebtor 1 nor Dorimarily for a	's debts primarily consumer bebtor 2 has primarily consu- personal, family, or househole are you filed for bankruptcy, di	umer debt ld purpose	<b>.</b> ."			1(8) as "incurred by an
			□ No.	Go to line 7		iu you pay	any creditor a tota	ar or \$0,425 or mor	. <b>G</b> :	
			☐ Yes	List below e paid that cre not include	. ach creditor to whom you pai editor. Do not include paymer payments to an attorney for the on 4/01/19 and every 3 year:	nts for don his bankru	nestic support obliq iptcy case.	gations, such as ch	nild support a	and alimony. Also, do
	_		•	•				or and the date o	raajaotinont	
	•	Yes.			r both have primarily consure you filed for bankruptcy, di			al of \$600 or more?	ı	
			■ No.	Go to line 7						
			□ <sub>Yes</sub>	include pay	each creditor to whom you pai ments for domestic support of this bankruptcy case.					
	Cre	editor'	s Name and	d Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. It alimony.	artners; relatives of any gen n control, or owner of 20% o	eral partners; partner r more of their voting	erships of which yo g securities; and a	ou are a gener iny managing a	al partner; corporations agent, including one for
	■ No					
	Yes. List all payments to an insider.				_	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
3.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	any property on a	eccount of a d	ebt that benefited an
	_	orginal by an includin				
	No					
	Yes. List all payments to an insider	D-1 ( 1	T-(-1	A 1	D (	41.1
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Include cred	this payment ditor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	ne case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo  ■ No. Go to line 11.  □ Yes. Fill in the information below.		rty repossessed, f	oreclosed, garni	shed, attache	d, seized, or levied?
	Creditor Name and Address	<b>Describe the Property</b>		Date		Value of the
		Explain what happened	ļ			property
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		uding a bank or fii	nancial institution	n, set off any	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  No Yes		rty in the possess	ion of an assigne	ee for the ben	efit of creditors, a
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup  No	otcy, did you give any gifts	s with a total value	of more than \$60	00 per person	?
	☐ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave jifts	Value
	Person to Whom You Gave the Gift and Address:					

Case number (if known) 17-60203

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

14.	Within 2 years before you filed for bankr	uptcy, c	lid you give any gifts or contributions	s with a total	value of more than	\$600 to any charity?		
	No							
	Yes. Fill in the details for each gift or c Gifts or contributions to charities that				Datas vau	Value		
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Describe what you contributed		Dates you contributed	Value		
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?							
	■ No □ Yes. Fill in the details.							
	Describe the property you lost and	Descri	be any insurance coverage for the lo	SS	Date of your	Value of property		
	how the loss occurred	Include	the amount that insurance has paid. Lince claims on line 33 of Schedule A/B: F	ist pending	loss	lost		
Par	t 7: List Certain Payments or Transfers	s						
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition p	preparir	ng a bankruptcy petition?			erty to anyone you		
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address		Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
	Person Who Made the Payment, if Not You  DebtorCC		Debt counseling		1/26/17	\$15.00		
	Armstrong Bankruptcy Law Offices 440 East Broadway, Ste. 100 Eugene, OR 97401 www.armstrongbankruptcy.com	<b>S</b>	Filing Fee and Attorney Fees		1/6/17 1/12/17	\$1,810.00		
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.							
	No							
	Yes. Fill in the details.		<b>5</b>		Data manuscrat	Amount of		
	Person Who Was Paid Address		Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	Yes. Fill in the details.  Person Who Received Transfer		Description and value of	Describe a	any property or	Date transfer was		
	Address		property transferred		received or debts	made		
	Person's relationship to you							

Case number (if known) 17-60203

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

Debtor 1 Justin Robert Austen

19.	beneficiary? (These are often called asset-protection devices.)  No  Yes. Fill in the details.							
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and St	orage Units	5			
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No  Yes. Fill in the details.	r other financial accou	nts; certificates	of deposit				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of according trument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 yo cash, or other valuables?  No	ear before you filed for	· bankruptcy, aı	ny safe dep	osit box or other deposit	tory for securities,		
	Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Address (Number, Street, City,		he contents	Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?  No Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City,		he contents	Do you still have it?		
Par	t 9: Identify Property You Hold or Control f	for Someone Else						
23.	Do you hold or control any property that son for someone.	neone else owns? Incl	ude any proper	ty you borr	owed from, are storing fo	or, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)		(Number, Street, City, State and ZIP		he property	Value		
Par	t 10: Give Details About Environmental Info	rmation						
For	the purpose of Part 10, the following definitio	ons apply:						
	Environmental law means any federal, state, toxic substances, wastes, or material into th regulations controlling the cleanup of these	e air, land, soil, surfac	e water, ground					
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.							

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Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

		1. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	Environmental law, if you know it	Date of notice			
25. H	ave you notified any governmental unit of  No	any release of hazardous material?					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	Environmental law, if you know it	Date of notice			
26. H	ave you been a party in any judicial or adr	ninistrative proceeding under any en	vironmental law? Include settlements a	nd orders.			
	_						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Part 1	1: Give Details About Your Business or	Connections to Any Business					
27. W	/ithin 4 years before you filed for bankrupt	cy, did you own a business or have a	any of the following connections to any	business?			
	☐ A sole proprietor or self-employed i	n a trade, profession, or other activity	y, either full-time or part-time				
	■ A member of a limited liability comp	pany (LLC) or limited liability partners	hip (LLP)				
	☐ A partner in a partnership						
	■ An officer, director, or managing ex	ecutive of a corporation					
	☐ An owner of at least 5% of the votin	g or equity securities of a corporation	n				
	No. None of the above applies. Go to I	Part 12.					
	Yes. Check all that apply above and fill	in the details below for each busines	SS.				
	Business Name Address	Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.			
	Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	· ·	•			
	J. Austen, Inc.	General contractor	Dates business existed EIN: 27-2343451				
5	5333 Viola St. Florence, OR 97439		From-To 2010 - 8/2014				
	Everwild, LLC	Construction and landscaping	EIN: 47-4760622				
	5333 Viola St. Florence, OR 97439		From-To 12/2015 - present				
	lithin 2 years before you filed for bankrupt stitutions, creditors, or other parties.	cy, did you give a financial statement	t to anyone about your business? Inclu	de all financial			
	- 110						
	Name Address Number, Street, City, State and ZIP Code)	Date Issued					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Debto	Justin Robert Austen		Case number (if known)	17-60203
Part 1	2: Sign Below			
are tru with a	e and correct. I understand that making	of Financial Affairs and any attachment ing a false statement, concealing prope up to \$250,000, or imprisonment for up	erty, or obtaining money or	
/s/ Ju	ıstin Robert Austen			
	n Robert Austen ture of Debtor 1	Signature of Debtor 2		
Date	February 10, 2017	Date		
Did yo	u attach additional pages to Your Sta	atement of Financial Affairs for Individu	uals Filing for Bankruptcy (	Official Form 107)?
No				
□ Yes	3			
Did yo	u pay or agree to pay someone who i	is not an attorney to help you fill out ba	inkruptcy forms?	
■ NI=	., ,	, , ,	•	

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

# **United States Bankruptcy Court District of Oregon**

In re	Justin Robert Austen		Case No.	17-60203				
		Debtor(s)	Chapter	13				
VERIFICATION OF CREDITOR MATRIX								
The abo	The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.							
Date:	February 10, 2017	/s/ Justin Robert Austen						
		Justin Robert Austen						

Signature of Debtor